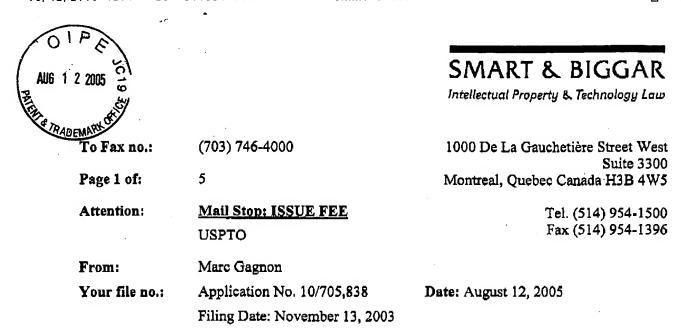


PART B - FEE(S) TRANSMITTAL

TRAD!	MARTICA	this form, together w		fee(s), to: <u>Mall</u> or Fax	P.O. Box 1450 Alexandria, Vi (703) 746-4000	for Patents rginia 22313-1450	
INST appro indici resint	RUCTIONS: This for prints, All further co ited unless corrected mance for notification	orm should be used for tra traspondence including the below or directed otherwises.	namitting the ISSU Patent, advance of a la Block 1, by (i	JE FEE and PUB rders and notificati s) specifying a new	LICATION FEB (If recome of maintenance figs or correspondence address	pilred). Blocks 1 through 5 g will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as wate "FEE ADDRESS" for
S 1	RENT CORRESPONDENT 7 MART & BIGG	CE ADDRESS (Note: Use block 1 in 1890 06/28/2005 SAR Stiere Street West, Suite	any charge of solitons)	,	Note: A cortificate of Fee(s) Transmittal. I papers. Each additionave its own certification	of mailing can only be used & his cartificate cannot be used a nal paper, anch as an assignment of mailing or transmission. criticate of Mailing or Transmittal is being with Fee(s) Transmittal is being with Step 188UB PRE address PTO (703) 746-4000, on the d	or domestic mailings of the for any other accompanying out or formal drawing, mus
01 FC:1501	1400.00 DA	1					(Depositor's name)
02 FC:1504 ° 03 FC:8001	300.00 DA 6.00 DA						(Signature)
_^	PPLICATION NO.	FILING DATE		PIRST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/705,838	11/13/2003	•	Jacques Duroc	her	86421-30	4887
TAIL	APPLN, TYPE	OCKEY HELMET COMP	ESUE F		PUBLICATION FEB	TOTAL PER(B) DUE	DATEDUB
	Lacistvorquez	МО	\$1400)	\$300	\$1700	09/28/2005
	EXAMINER		ART UNITE C		CLAS9-SUECLASS	}	
	LINDSBY, F	RODNEY M	3765		002-425000		
Addition of the party of the pa	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address form PTO/SE/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SE/47; Rev 03-02 or more record) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON T.			(1) the names of up to 3 registered pasem attornays or agents OR, alternatively. (2) the name of a single firm (baving as a member a registered attornay or agent) and the names of up to 2 suggestered patent attornays or agents. If no name is histed, no name will be printed.			
						use is identified below, the do	current has been filed for
	name of assigni				TTY and STATE OR CO		
В.	AUER NIKE Hocke	y Inc.		Saint-Jérôme. Qu	iebec, CANADA		
Please	shock the appropriate	essignee category or catego	sies (will not be pri	nted on the patent)	: 🗘 Individual 🔯 C	orporation or other private gro	up entity Government
_	following foe(s) are o Asno Foe	enclosed:		Payment of Fee(s)	•		
		mall entity discount permitte	×0		emount of the fee(s) is ea dit card. Force PTO-203		
3	Advance Order - # of	Coples 2				harps the required fee(s), or o	redit any overpayment, to
		(from status indicated above)		***************************************		
		MALL ENTITY ensus, See is received to apply the dis- publication/Fee (U required) a rds of the United States Pate				LL ENTITY status. See 37 CF. Ty paid issue fee to the applicationed attorney or agant; or the	
	norized Signature	Muck	MADO	2/	Date	August 12, 2005	
Type	ed or printed name	Mara Gagnon	7.0		Registration	No. 51,273	
						the public which is to file (and minutes to complete, including amments on the amount of tim Trademerk Office, U.S. Depu S. SEND TO: Commissioner R displays a valid OMB control r	



Reply to Montreal file no.:

86421-30

Time:

If there are any transmission problems, please call (514) 954-1500.							
Original copy and any enclosures	□ will	be sent by	□ mail				

CERTIFICATE OF Applicant(s): Jacques D	Docket No. 86421-30		
Application No. 10/705,838	Filing Date November 13, 2003	Examiner Rodney M. LINDSEY	Group Art Unit 3765
AUG 1 2 2005 6	ELMET COMPRISING AN OC	CIPITAL ADJUSTMENT MEC	CHANISM
TRADEMAN OF			
I hereby certify that this		ISSUE FEE	
	•	(Identify type of correspondence)	
is being facsimile transm	nitted to the United States Patent	t and Trademark Office (Fax. N	No. (703) 746-4000
on August 12	, 2005		
(Date)			
		Antoun I	Eid
		(Typed or Printed Name of Perso	on Signing Certificate)
		Antonn &	L.
		(Signature,	
•			
,	Note: Each paper must ha	ve its own certificate of mailing.	•
			•
			·
		•	
•		•	÷
			<u>, </u>

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)				Docket No. 86421-30		
A 1/2	(37 C.F.R. 1.311) 86421-30 Applicant(s): Jacques DUROCHER					
Applicant(s): Jacqu	es DUROCHER					
Application No. 10/705,838	Filing Date November 13, 2003	Examine Rodney M. LIN		Customer No. 28291	Group Art Unit	Confirmation No. 4887
	KEY HELMET COM			JUSTMENT M	ECHANISM	
01 P E	હો					
Transmitted berevit		COMMISSIONER	x 1450	•		
Hansmitted herewi	an are are rollowing to	•	ed application	on.		
_	nemittal Form PTOL			P-	.	•
☑ Utility Fee:	\$ 1400.00 C	Design Fee:			Plant Fee:	
☑ Publication Fe ☐ A check in the ☐ A check in the ☐ ■ ■ □ ■ □ ■ □ ■ □ ■ □ ■ □ ■ □ ■ □ ■ □		is attact	her			
·	s hereby authorized to			count No.	19-2550	
as described i	-	-			·	
_	arge the amount of					
	dit any overpayment.		•			
	arge any additional fe	`				
	redit card. Form PTO		oublic. Cree	dit card inform	ation should no	at be
included on t	formation on this fe his form. Provide c	redit card informat	ion and au	thorization on	PTO-2038.	
· Il Mu	XUU II D	1_				
N 303 -	Signature		Dated:	August 12, 20	05	•
Marc Gagnon, R SMART & BIGO						•
	etiere Street West					
Suite 3300			•			·
Montreal, Quebe	c H3B 4W5	•				
CANADA						
_	for 2 advanced copies					
This ce	icate of Transmission by rtificate may only be use by deposit account.	ed if paying		Certificate of M	ailing by First Clas	s Mail
	document and authorizating facsimile transmitted to ffice (Fex No.		with the	United States Pos a mail in an envel- P.O. Box 1450, A	correspondence is tal Service with suff ope addressed to "(Jexandria, VA 2231:	clent postage as
(Date)				(Dale)		
	Signature			Signature of Pers	on Mailing Correspon	dence
Typed or Prin	ted Name of Person Signing	Certificate	Туре		of Person Malling Col	